20	004 FOR PROF ANNUAL F			T I	ION		FILED			
DOCUMENT # P94000076125 1. Entity Name TANCO REAL ESTATE CO., INC.						Feb 12, 2004 08:00 AM Secretary of State				
5721 ROYA	ce of Business IL PALM BEACH BLVD. M BEACH FL 33411	Mailing Address 5721 ROYAL PALM BEACH BL\ WEST PALM BEACH FL 33411 US						0.20 (1000) 0211100) () ()		
	Place of Business	3. Mailing Address			<u>L</u> .					
Suite, Apt. #. etc.		Suite, Apt #, elc.				MOORE CR2E034 (11/03)				
City & Stal	te	City & State				4. 1	FEI Number 65-0530890	Applied I		
Zip Country		Zip Coun			try	S. Certificate of Status Desired Section 2010/00/00/00/00/00/00/00/00/00/00/00/00/				
6. Name and Address of Current Registered Agent						7. 1	Name and Address of New Registered Agen			
TANEN, JEFFREY S					Name					
2. S. BISCAYNE BLVD. SUITE 3250					Street Address (Street Address (P.O. Box Number is Not Acceptable)				
MIAMI FL 33131					City					
8. The above named entity submits this statement for the purpose of changing its registere										
the obligations of registered agent.										
SIGNATURE										
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Make Check Payable to Florida Department of State							9. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Added to Fee	y Be es	
10. TITLE	OFFICERS AND DIRECTORS 11					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11				
NAME	TANEN, BARBARA NA 5749 ROYAL PALM BEACH BLVD. ST					□ Change □ Addition U00000047879 02/12/04-80058-011 150.00				
TITLE NAME STREET ADDRESS CITY - ST - ZIP			Delete						Addition	
TITLE NAME STREET ADDRESS CITY-SI-ZIP			Delete	TITLE NAME STREE				Change 🗌 A	Addition	
title Name Street address			Delete	TITLE NAME STREE	E ADDRESS			 Change 🔲 Ai	Addition	
CITY-ST-ZIP TITLE		uterannen av	Delete	CITY- TITLE	ST-ZIP			Change 🗌 Ar	Addition	
NAME Street Address City-st-zip					ET ADDRESS ST-ZIP		_			
TITLE NAME STREET ADDRESS CITY - ST - ZIP			Delete	CITY-	t address St-zip				ddition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.										
SIGNATURE: Baben TON - BARBARA TAVEN 2/9/04 (561) 798-3196 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR										